

POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	
Application Number	1069460
Filing Date	Jan 21, 2008
First Named Inventor	WAYNE W. Loefer
Title	Accession Systems and Method
Art. Unit	3778
Examiner Name	Cheryl Miller
Attorney Docket Number	HSO-001-PAT

I hereby revoke all previous powers of attorney given in the above-identified application.

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Practitioner(s) Name	Registration Number
William H. Dispert	26,723

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☒ Applicant/Inventor.

OR

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/06) submitted herewith or filed on _____

SIGNATURE OF Applicant or Assignee of Record

Signature:

WAYNE W. Loefer, of 107 Ann Road Silver Spring, MD 20910, Ingal

Date:

March 3rd 2009

Name:

CTD, KOH Medical Ltd.

Telephone:

1972 984800M

Title and Company:

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 2 forms are submitted.

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POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10423658
	Filing Date	April 21, 2004
	First Named Inventor	WAYNE STEINMAN
	Title	Acoustical System and Method
	Art Unit	3738
	Examiner Name	Cheryl Miller
Attorney Docket Number	HSH-001-PAT	

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☐ Firm or Individual Name: Elvert Seamus Chorn & McKitt, LLC

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☒ Applicant/Inventor.

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/08) submitted herewith or filed on _____

SIGNATURE OF Applicant or Assignee of Record

Signature

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Date

March 3rd 2009

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Title and Company

CEO, KDN Medical Ltd

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